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**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

	Application Number	10/786,681	
	Filing Date	02/25/2004	
	First Named Inventor	Modak	
	Art Unit	1618	
	Examiner Name	Jagadishwar Rao Samala	
Total Number of Pages in This Submission		Attorney Docket Number	070050.2535

**ENCLOSURES (Check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Three reference documents
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Baker Botts L.L.P.		
Signature			
Printed name	Sandra S. Lee		
Date	08/27/2009	Reg. No.	51,932

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature		
Typed or printed name		Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# FEE TRANSMITTAL for FY 2007

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 180)

## Complete if Known

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Examiner Name	Jagadishwar Rao Samala
Art Unit	1618
Attorney Docket No.	070050-2535

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

Deposit Account:

Deposit Account Number: **02-4377**  
Deposit Account Name: **Baker Botts L.L.P.**

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below  Credit any overpayments  
 Change any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION (continued)

### ADDITIONAL FEES

- Surcharge - late oath or filing fee  
 Non-English Specification  
 Extension for reply within first month  
 Extension for reply within second month  
 Extension for reply within third month  
 Extension for reply within fourth month  
 Extension for reply within fifth month  
 Notice of Appeal  
 Filing a brief in support of an appeal  
 Petition to revive - unavoidable  
 Petition to revive - unintentional  
 Utility Issue Fee  
 Design Issue Fee  
 Publication Fee  
 Petitions to the Commissioner  
 Request for Continued Examination (RCE)  
 Information Disclosure Statement (IDS) \$180

## FEE CALCULATION

### Extra Claim Fees

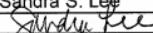
	Extra Claims	Fee	Fee Paid
Total Claims	<input type="text"/>	x <b>52</b>	= <b>\$0</b>
Independent Claims	<input type="text"/>	x <b>220</b>	= <b>\$0</b>
Multiple Dependent	<input type="text"/>	= <b>\$0</b>	
SUBTOTAL		<b>\$0</b>	

Fee Description	Large Entity	Small Entity
Claims in excess of 20	<b>52</b>	<b>26</b>
Independent claims in excess of 3	<b>220</b>	<b>110</b>
Multiple dependent claim, if not paid	<b>390</b>	<b>195</b>

Other fee -

**SUBTOTAL** (\$ 180)

(Complete if applicable)

Name (Print/Type)	Sandra S. Lee	Registration No. (Attorney/Agent)	51,932	Telephone	212-408-2500
Signature		Date	08/27/2009		

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.